2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 02, 2002 8:00 am § Secretary of State P99000002326 DOCUMENT # 1. Entity Name 05-02-2002 90128 043 ***150.00 UNIVERSAL STAR VIDEO, INC. Principal Place of Business Mailing Address 118 HIALEAH DRIVE 118 HIALEAH DRIVE UUUZOUU HIALEAH FL 33010 HIALEAH FL 33010 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0899258 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RODRIGUEZ, RIGOBERTO MORALES, RAMON 1370 NW 32 PL. **MIAMI FL 33125** City Zio Code 33018 MIAMI LAKES 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida RIGOBERTO RODRIGUEZ - PRESIDENT SIGNATURE 4/18/02 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE X Delete TITLE PDChange **X** Addition MORALES, RAMON RODRIGUEZ, RIGOBERTO NAME NAME 1370 NW 32 PLACE STREET ADDRESS 8861 NW 142 ST. STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33135** CITY-ST-ZIP MIAMI, LAKES, FL. 33018 ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CiTY-ST-7IP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is type and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

RIGOBERTO RODRIGUEZ - P. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/02 (305) 887-9860

Daytime Phone #

CR2E034 (9/01)